



PART B - FEE(S) TRANSMITTAL

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50855 7590 05/04/2006

UNITED STATES SURGICAL,
A DIVISION OF TYCO HEALTHCARE GROUP LP
195 MCDERMOTT ROAD
NORTH HAVEN, CT 06473

07/19/2006 WABDEL3 00000029 210550 10630945

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA

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| | |
|-----------------------|--------------------|
| Rebecca Layman | (Depositor's name) |
| <i>Rebecca Layman</i> | (Signature) |
| 7/12/06 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------------|------------------|
| 10/630,945 | 07/30/2003 | Steven L. Bennett | 1583 CIP II CON III (203- | 1779 |

TITLE OF INVENTION: BIOABSORBABLE BRANCHED POLYMERS CONTAINING UNITS DERIVED FROM DIOXANONE AND MEDICAL/SURGICAL DEVICES MANUFACTURED THEREFROM

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 08/04/2006 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-----------------|----------|----------------|
| BUTNER, DAVID J | 1712 | 428-423100 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

United States Surgical Corporation

North Haven, CT

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number **21-0550** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature **Mark Farber**

Date **July 12, 2006**

Typed or printed name

Registration No. **34,159**

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Docket: 1583 CIP 2 CON 3

THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Bennett et al.

Examiner: Buttner, David J.

Group Art Unit: 1712

Serial No: 10/630,945

Filed: July 30, 2003

For: **Bioabsorbable Branched Polymers Containing Units Derived From
Dioxanone and Medical/Surgical Devices Manufactured Therefrom**

CERTIFICATE OF MAILING

Date of Deposit: July 12, 2006

I hereby certify that the following:

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Rebecca Layman

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